





# FY 2014 Office of Head Start AIAN Re-evaluation Protocol





# **Table of Contents**

FY 2014 OHS AIAN Evaluation Protocol	1
Overview	
Program Governance	2
Program Governance Key Indicator #1—Structure and Participation	
Management Systems	3
Management Systems Key Indicator #2—Ongoing Monitoring	
Management Systems Key Indicator #3—Human Resources	5
ERSEA	7
ERSEA Key Indicator #2—Eligibility	7
Child Health & Safety	9
Child Health & Safety Key Indicator #1—Access to Health and Dental Care	
Child Health & Safety Key Indicator #3—Safe Physical Environments	12
Child Health & Safety Key Indicator #4—Healthy Practices and Routines	16
Child Health & Safety Key Indicator #5—Appropriate Group Sizes and Supervision	17
Child Development and Education	19
Child Development & Education Key Indicator #1 — School Readiness	19



## **FY 2014 OHS AIAN Evaluation Protocol**

#### **Overview**

OHS has developed a process for re-evaluating AIAN grantees who are candidates for designation renewal. The re-evaluation process includes the following activities:

- Targeted on-site monitoring that examines core Key Indicators and Compliance Measures.
- Targeted CLASS observations.
- Grantee participation in ensuring accurate and timely information is available to the review team, including accurate HSES data and staff and child files available in a central location for the duration of the review.

At the conclusion of the re-evaluation process, OHS will issue the AIAN grantee a letter indicating the results of the re-evaluation, specifically whether the program must compete for renewed funding or will receive a non-competitive grant award.

#### Organization of the AIAN Re-evaluation Protocol

The AIAN Re-evaluation Protocol is the instrument used to gather data during re-evaluation of AIAN Head Start grantees. The Re-evaluation Protocol contains a core set of Key Indicators and Compliance Measures from the FY 2014 On-site Monitoring Protocol. AIAN grantee performance will be assessed using the AIAN Re-evaluation Protocol in the following areas:

Content Area	Key Indicator
Program Governance	Structure and Participation
Management Systems	<ul><li>Ongoing Monitoring</li><li>Human Resources</li></ul>
ERSEA	Eligibility
Child Health & Safety	<ul> <li>Access to Health and Dental Care</li> <li>Safe Physical Environments</li> <li>Healthy Practices and Routines</li> <li>Appropriate Group Sizes and Supervision</li> </ul>
Child Development & Education	School Readiness





### **Program Governance**

# **Program Governance Key Indicator #1—Structure and Participation**

The program has the required structure and process in place to promote full participation of the governing body and the Policy Council.

	Compliance Measures	Federal Regulations
1.2	The program has established a Policy Council elected by parents of currently enrolled children, whose membership is composed of a majority of parents of children currently enrolled in the program as well as members of the community served by the Head Start agency.	642(c)(2)(B)(i) 642(c)(2)(B)(ii)(I) 642(c)(2)(B)(ii)(II)
	Note: Applies to grantees only	

#### **Targeted Questions**

#### Policy Council—Interview

Ask the Policy Council to describe the composition of its membership and share relevant documentation that confirms that the Policy Council has the appropriate composition and members are elected.

Does the Policy Council membership meet the following requirements?

- At least 51 percent of the members are parents of children currently enrolled in the Head Start program (including delegate agencies).
- At least one member is from the at-large community served by the program or any delegate agency.
- Members are elected by parents of children currently enrolled in the program.

Ask the program to provide the documents needed and review them with you to confirm the Policy Council's membership.

GOV1.2

Program Governance 2





### **Management Systems**

### Management Systems Key Indicator #2—Ongoing Monitoring

The program has an effective system for monitoring its management, operations, and delivery of services.

	Compliance Measures	Federal Regulations
2.1	The program established and implements procedures for the ongoing monitoring of its operations and services to ensure compliance. The program's ongoing monitoring:	641A(g)(3)
	<ul> <li>Uses effective tools and procedures to ensure the program is in compliance and meets its goals and objectives</li> <li>Clearly defines staff roles and responsibilities in program oversight</li> </ul>	
	Conducts frequent, ongoing monitoring activities	
	Collects and uses data for planning activities and to ensure compliance	
	Ensures ongoing monitoring in delegate agencies takes place	

#### **Targeted Questions**

Head Start/Early Head Start Director—Interview/Debrief

- How does the program:
  - Use effective tools and procedures to ensure it is in compliance and meets its goals and objectives
  - Clearly define staff roles and responsibilities in program oversight
  - Conduct frequent, ongoing monitoring activities
  - Collect and use data for planning activities and to ensure compliance
  - Ensure ongoing monitoring of delegate agencies takes place

SYS2.1

#### Health Services Coordinator—Interview

- ► This program has not been open for 45 days (or 30 days for programs operating shorter durations). Ask the Health Coordinator to describe:
  - The process the program uses to ensure all enrolled children receive the required screenings within 45 days of entry
  - The steps taken if the program determines that a child has not received all required screenings



#### Administration for Children and Families | U. S. Department of Health and Human Services



▶ This program has not been open for 90 days (or 30 days for programs operating shorter durations). Ask the Health Coordinator to describe the process the program uses to ensure all children have a determination (as to whether they are up-to-date on preventive and primary health care) within 90 days of entry into the program?

SYS2.1





### Management Systems Key Indicator #3—Human Resources

The program implements Human Resource practices to promote safe and healthy environments for staff, children, and families and provide services to children and families.

	Compliance Measures	Federal Regulations
3.2	The program develops and implements written standards of conduct that are available to all staff and contain provisions for appropriate penalties when violations occur.	1304.52(i)(1) 1304.52(i)(1)(i) 1304.52(i)(1)(ii)
	Note: 1304.52(i)(1)(iii) was removed from this section and is now located in CHS 5.5.	1304.52(i)(1)(iv) 1304.52(i)(3)
3.4	<ul> <li>Prior to employing an individual, the program obtains a:</li> <li>Federal, State, or Tribal criminal record check (CRC) covering all jurisdictions in which it provides Head Start services to children</li> <li>Federal, State, or Tribal CRC as required by the law of the jurisdiction in which the program provides Head Start services</li> <li>CRC as otherwise required by Federal law</li> </ul>	648A(g)(3)(A) 648A(g)(3)(B) 648A(g)(3)(C)

#### **Targeted Questions**

#### Head Start/Early Head Start Director—Interview/Debrief

Ask the Director to describe how the program informs staff about the standards of conduct. What policies and procedures does the program have in place to ensure that the standards are followed?

If there were any violations of the program's standards of conduct, talk to the Director about such violations and determine what penalties were applied.

**SYS3.2** 

#### **Targeted Questions**

#### Staff File

- Did the program obtain one of the following for the employee?
  - A State, Tribal, or Federal criminal record check covering all jurisdictions in which the grantee provides Head Start services to children
  - A State, Tribal, or Federal criminal record check as required by the law of the jurisdiction in which the grantee provides Head Start services
  - A criminal record check as otherwise required by Federal law



#### Administration for Children and Families | U. S. Department of Health and Human Services



- ▶ Was the employee hired within the last 12 months?
- Was the criminal record check conducted prior to employment?

SYS3.4

#### Head Start/Early Head Start Director—Interview/Debrief

▶ If any staff members did not have CRCs or were hired within the last 12 months and did not complete CRCs prior to hire, talk to the Head Start Director regarding the policies in place and determine why checks were not completed and what, if any, steps will be taken to correct the issue.

SYS3.4

#### Criminal Record Checks—Document

▶ Ask the Head Start Director or Human Resources Manager for a copy of the criminal record check (CRC)-tracking data that indicates the date each CRC was completed and the date of hire for each staff member.

Use this tracking sheet during your discussions with the Reviewers to compare the accuracy of what they saw in the files with what is seen in the tracking system.

Determine whether the program has completed CRCs and whether CRCs were completed prior to hire for the following staff: teacher aides/assistants, food preparation staff, bus monitors, and FCE staff. If you have concerns regarding the information documented in the CRC-tracking data, or if the team's staff file reviews have found a large number of staff completed CRCs late or not at all, compare a sample of the data from the tracking system with the actual staff files of the teacher aides/assistants, food preparation staff, bus monitors, and FCE staff.

SYS3.4





## **ERSEA**

### ERSEA Key Indicator #2—Eligibility

The program verifies eligibility and enrolls children and pregnant women according to Federal regulations.

	Compliance Measures	Federal Regulations
2.1	Program staff verified each child's eligibility and included in each file a statement signed by a program employee identifying the child's eligibility category and the documents examined to determine eligibility.	1305.4(c) 1305.4(d) 1305.4(e)
	Note: Signed statements may list one of the following acceptable forms of proof of eligibility: individual Income Tax Form 1040; W-2 forms, pay stubs, pay envelopes, or employers' written statements; documentation showing current status as recipients of public assistance; and declarations of zero income. Also, note that homeless children and foster children are categorically eligible.	
2.3	<ul> <li>American Indian/Alaska Native programs ensure that children who meet the following requirements are enrolled before enrolling more than 10 percent over-income children:</li> <li>All income-eligible children who wish to enroll living on the reservation</li> <li>All income-eligible children who wish to enroll and are native to the reservation but living in non-reservation areas</li> <li>All income-eligible non-American Indian children whose families wish to enroll if the non-reservation area is not served by another Head Start program</li> </ul>	1305.4(b)(3)(i) 1305.4(b)(3)(ii) 1305.4(b)(3)(iv)
	Note: Applies only to AIAN programs	

#### **Targeted Questions**

#### Child File

Summary Results for Review of Signed Statement Form:

- ▶ Is there a statement in the file verifying the child's eligibility?
- Is the statement verifying the child's eligibility signed by a program employee?
- ▶ Did the statement indicate which documents, in accordance with 1305.4(d), were examined to determine whether the child was eligible to participate in the program?

ERSEA2.1

ERSEA 7





#### **Targeted Questions**

#### Child File

Summary Results for Review of Signed Statement Form:

- In which eligibility status did the program enroll the child?
- ▶ Is there source documentation in the child's file?
- ▶ Using the documents present in the child file, re-determine the child's eligibility status. Did the program enroll the child using the correct eligibility?
- In which eligibility status should the program have enrolled the child?

#### ERSEA Coordinator—Interview

► Interview the ERSEA Coordinator about the program's enrollment process. Ask him or her to describe the program's enrollment process in detail and provide you with information on how enrollment decisions are made.

Prior to the program enrolling children whose families exceed the low-income guidelines, the AIAN program must ensure that:

- All children from Indian and non-Indian families living on the reservation that meet the low-income guidelines and who wish to be enrolled in Head Start are served.
- All children from income-eligible Indian families native to the reservation but living in non-reservation areas approved as part of the Tribe's service area, who wish to be enrolled in Head Start are served by the program.

ERSEA2.3

ERSEA 8





### **Child Health & Safety**

# Child Health & Safety Key Indicator #1—Access to Health and Dental Care

The program establishes each child's health status and provides follow up and referral as required.

	Compliance Measures	Federal Regulations
1.1	The program obtains a determination from a health care professional as to whether each child is up to date on a schedule of primary and preventive health care (EPSDT), including dental, and assists parents in bringing their children up to date as needed.	1304.20(a)(1)(ii) 1304.20(a)(1)(ii)(A) 1304.20(a)(1)(ii)(B) 1304.20(a)(2)
1.2	The program takes steps to ensure that each child with a known, observable, or suspected health, dental, or developmental problem receives:  • Further diagnostic testing • Examination • Treatment from a licensed or certified health care professional • A follow-up plan to ensure required treatment has begun	1304.20(a)(1)(iii) 1304.20(a)(1)(iv) 1304.20(c)(3)(ii)
1.3	The program involves parents, consulting with them immediately when child health or developmental problems are suspected or identified.	1304.20(e)(1)

#### **Targeted Questions**

#### Child File

Summary Results for Program Obtaining Determinations as to Whether Children are Up-To-Date on Preventive and Primary Health Care and Whether Parents Have Been Assisted in Bringing Their Children Up-To-Date

- On what date did the program obtain the determination from the health care professional regarding whether the child was up to date on a schedule of age-appropriate preventive and primary health care (including EPSDT)?
- ➤ On what date did the health care professional make a determination as to whether the child was up-to-date on a schedule of age-appropriate preventive and primary health care (including EPSDT)?
- Did the health care professional determine that the child was up-to-date?



#### Administration for Children and Families | U.S. Department of Health and Human Services



► Has the program assisted parents in making arrangements to bring their children up-to-date on a schedule of primary and preventive health care?

CHS1.1

#### Health Services Coordinator—Interview

- Ask the Coordinator to explain the process used to keep children up-to-date throughout the program year.
- ► For all children who are not up-to-date on the recommended schedule of preventive and primary health care, how does the program assist parents in making arrangements to bring their children up-to-date?
- ► This program has not been open for 90 days (or 30 days for programs operating shorter durations).

Ask the Health Coordinator to describe the process the program uses to ensure all children have a determination (as to whether they are up-to-date on preventive and primary health care) within 90 days of entry into the program.

CHS1.1

#### **Targeted Questions**

#### Child File

Summary of Results for Further Testing, Examination, and Treatment for Children with Observable, Known, or Suspected Health or Developmental Problems

- ▶ Does the child have a known, observable, or suspected health, dental, or developmental problem?
- ▶ Did the program arrange for further diagnostic testing, examination, and treatment by an appropriate licensed or certified professional?
- ▶ Did the child receive follow-up treatment as recommended by the licensed or certified professional?
- ▶ Did the program develop or is the program in the process of developing a follow-up plan for the child?

CHS1.2





#### **Targeted Questions**

#### Health Services Coordinator—Interview

- Ask the Coordinator to describe how parents are notified when the program suspects children have health or developmental problems.
  - What methods are used to notify parents?
  - How does the program track the concerns and the notification of parents?
  - When are parents notified?

CHS1.3





# Child Health & Safety Key Indicator #3—Safe Physical Environments

The program ensures physical environments are safe for children, parents, and staff.

Compliance Measures	Federal Regulations
3.1 Facilities used for center-based program options, home-based group socialization activities, or Family Child Care comply with State and local licensing requirements.	1306.30(c) 1306.35(d)
The program has adequate usable indoor and outdoor space.	1304.53(a)(5) 1306.35(a)(3)
3.4 The program ensures the safety and security of children by keeping facilities, materials, and equipment well maintained, clean, and in good repair.	1304.53(a)(7) 1304.53(a)(8) 1304.53(a)(10) 1304.53(a)(10)(i) 1304.53(a)(10)(iv) 1304.53(a)(10)(vi) 1304.53(a)(10)(vi) 1304.53(a)(10)(vii) 1304.53(a)(10)(viii) 1304.53(a)(10)(xii) 1304.53(a)(10)(xii) 1304.53(a)(10)(xiv) 1304.53(a)(10)(xiv) 1304.53(a)(10)(xiv) 1304.53(a)(10)(xvi) 1304.53(a)(10)(xvi) 1304.53(b)(3) 1306.35(b)(2)(ii) 1306.35(b)(2)(iii) 1306.35(b)(2)(vii) 1306.35(b)(2)(vii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viii) 1306.35(b)(2)(viiii) 1306.35(b)(2)(viiii)





#### **Targeted Questions**

#### Safety Observation--Center

Does the program have a current license for this center?

CHS3.1

#### **Targeted Questions**

#### Safety Observation—Center-Based Classroom and FCC

Summary of Results for Adequate Usable Indoor and Outdoor Space:

- ▶ Does the classroom provide at least 35 square feet of usable indoor space per child (excluding bathrooms, halls, kitchens, staff rooms, and storage space)?
- ▶ Does the Family Child Care home have sufficient indoor and outdoor space that is usable by and available to children?

**CHS3.3** 

#### **Targeted Questions**

#### **Environmental Scan**

Please use this space to document notes based on your first impressions of the setting you are observing.

#### Safety Observation—FCC

- Are functioning smoke and carbon monoxide detectors installed and properly located?
- ▶ If the Family Child Care home has a basement, and local health officials recommend radon detectors, are radon detectors installed?
- ▶ Is there a system of supervision in place that ensures the safety of children not within view for any period?
- ▶ Does the provider ensure the safety of children when a body of water, road, or other potential hazard is present, or when children are being transported?
- ▶ Is there a fence to prevent children's unsupervised access to water hazards, such as swimming pools or other bodies of water?
- ▶ Did the provider secure health certificates for pets to document they have up-to-date immunizations and are free from conditions that may pose a threat to children's health?
- ▶ Did the provider ensure that pets are managed appropriately to ensure children's safety at all times?



#### Administration for Children and Families | U.S. Department of Health and Human Services



- Does the provider ensure that alcohol and drugs are not accessible to children at all times?
- Are children safe from the potential hazards posed by appliances (stove, refrigerator, microwave, etc.), such as appliances with frayed wires, hot stoves, and refrigerator coils?
- Are the premises free from pests?
- ▶ If needed, are chemicals for controlling pests used while children are not on premises?
- Are firearms or other weapons inaccessible or kept in areas not occupied by children?
- ▶ Does the provider ensure that alcohol and drugs are not consumed while children are present?
- ▶ Does the program ensure that sleeping arrangements for infants (e.g., cribs, playpens, bassinettes) are free of soft bedding materials (e.g., soft mattresses, pillows, stuffed animals, fluffy blankets, comforters)?

#### Safety Observation—Center-Based Classroom

- Are the facilities, materials, and equipment well maintained and in good repair?
- ▶ Is the classroom clean?
- Are there undesirable and hazardous materials and conditions?
- Is the air quality good?
- ▶ Is the classroom free of pollutants, including mold, lead, and pesticides?
- Is lighting sufficient and adequate for classroom activities?
- ➤ Are electrical outlets accessible to children designed to prevent shock through the use of covers, installation of child-protection outlets, or use of safety plugs?
- ▶ Are windows and glass doors constructed, secured, and adjusted to prevent children's injury and escape?
- Are toilets and hand washing facilities clean, adequate in number, in good repair, and easily reached by children?
- Are toileting and diapering areas separated from areas used for cooking, eating, and children's activities?
- ▶ Does the program ensure that sleeping arrangements for infants (e.g., cribs, playpens, bassinettes) are free of soft bedding materials (e.g., soft mattress, pillows, stuffed animals, fluffy blankets, comforters)?
- ▶ Is there a safe and effective heating and cooling system that is insulated to protect children and staff from potential injuries?
- Are exits clearly visible and evacuation routes clearly marked and posted so that the path to safety outside is unmistakable?

**CHS3.4** 





#### Safety Observation—Center

- Does the design of the playground and selection and layout of playground equipment and/or surfaces minimize the possibility of injury to children?
- ▶ Is the center free of air pollutants, including mold, smoke, lead, pesticides, and herbicides, as well as soil and water pollutants?
- Does the program maintain a smoke-free environment on center grounds?
- Are outdoor premises cleaned daily and kept free of undesirable and hazardous materials and conditions?
- ▶ Is a fire extinguisher available that is easily accessible, and is there a service date on the fire extinguisher showing that it has been updated at least annually?
- Are an appropriate number of smoke detectors installed, and is there documentation showing the smoke detectors are tested regularly?
- ▶ Is adequate emergency lighting available in case of a power failure?
- ▶ If there is spraying of pesticides or herbicides, does the program ensure that no children are present during the spraying, and children do not return to the affected area until it is safe?
- ▶ Is all sewage and liquid waste disposed of properly?
- Are garbage and trash stored in a safe and sanitary manner?

CHS3.4





# Child Health & Safety Key Indicator #4—Healthy Practices and Routines

The program establishes and maintains healthy practices and routines.

	Compliance Measures	Federal Regulations
4.4	<ul> <li>Obtains information from parents about their children's health and safety needs</li> <li>Identifies and plans for accommodations</li> <li>Ensures that appropriate staff are informed and trained in accordance with the program's confidentiality policy</li> </ul>	1304.22(b)(3)
4.8	The program ensures that medication is properly administered, stored, and labeled and is not accessible to children.	1304.22(c)(1) 1304.22(c)(2)

#### **Targeted Questions**

#### Health Services Coordinator—Interview

- Ask the Health Coordinator how the program accommodates each child's individual health and safety needs.
  - Ask for examples of how the program shared information about individual health and safety needs with staff and parents.
  - Ask the Coordinator to provide examples of some of the accommodations that were needed.
  - Ask the Coordinator how staff are informed and trained regarding needed accommodations.

CHS4.4

#### **Targeted Questions**

#### Safety Observation—Center-Based Classroom and FCC

- Are medications labeled and stored under lock and key and refrigerated if necessary?
- Are medications administered properly?

CHS4.8





# Child Health & Safety Key Indicator #5—Appropriate Group Sizes and Supervision

The program ensures children's safety through effective supervision and optimal learning environments by providing appropriate group sizes.

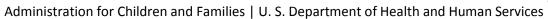
	Compliance Measures	Federal Regulations
5.3	The program arranges outdoor play areas at center-based programs to prevent children from getting into unsafe and/or unsupervised areas. The program also ensures that children en route to play areas are not exposed to vehicular traffic without supervision.	1304.53(a)(9)
	Note: Applies only to programs with a center-based program option	
5.4	The program ensures children are released only to a parent, legal guardian, or other individuals as designated in writing by the parent or legal guardian.	1310.10(g)
5.5	No children are left alone or unsupervised while under the care of the program.	1304.52(i)(1)(iii)

#### **Targeted Questions**

#### Safety Observation—Center

- Are outdoor play areas arranged to prevent children from leaving the premises and getting into unsafe and unsupervised areas?
- ▶ Did you observe any instances in which children left an outdoor play area and were able to access unsafe or unsupervised areas or in which children en route to play areas at one or more centers were exposed to vehicular traffic without supervision?

CHS5.3







#### **Targeted Questions**

#### Teacher—Interview

Ask staff to describe the process in place to ensure that children are released only to parents or legal guardians, and if children are released to another individual, the parent or guardian has provided permission in writing. Ask them how they ensure the contact information and roster they have are current.

CHS5.4

#### Bus Driver—Interview

Ask the bus driver(s) to describe the process in place to ensure that children are released only to parents or legal guardians, and if children are released to another individual, the parent or guardian has provided permission in writing. Ask them how they ensure the contact information and roster they have are current.

CHS5.4

#### Transportation Coordinator—Interview

- With the Transportation Coordinator, review the program's procedures regarding the release of children and emergency contact with parents and guardians.
  - Where is this information kept?
  - What process is in place to keep this information and the roster up-to-date?

CHS5.4

#### **Targeted Questions**

#### Transportation Coordinator, FCC Provider, Teacher or Assistant, Bus Driver—Interview

Ask staff to describe the process in place to ensure children are not left behind in a classroom or on a vehicle. Has a child ever been left behind? If yes, document the details and follow-up actions that were taken.

CHS5.5





# **Child Development and Education**

# **Child Development & Education Key Indicator #1— School Readiness**

The program has developed a system for establishing, tracking, and reporting school readiness goals.

	Compliance Measures	Federal Regulations
1.1	The program has engaged in a process to align its school readiness goals with the Head Start Child Development and Early Learning Framework, State Early Learning guidelines, and the requirements and expectations of the schools the children will attend to the extent that they apply to children participating in the Early Head Start or Head Start program and has consulted with the parents of children participating in the program.	1307.3(b)(1)(i) 1307.3(b)(1)(ii) 1307.3(b)(1)(iii)
1.2	The program has a system and processes in place to do the following in order to track, use, and report progress on school readiness goals:	1307.3(b)(2)(i) 1307.3(b)(2)(ii)
	<ul> <li>Aggregate and Analyze the following:</li> <li>Individual, ongoing child-level assessment data for all children birth to age 5</li> <li>Child-level data at least three times a year using data from one or more valid and reliable assessment tools</li> <li>For programs serving dual-language learners (DLLs):</li> <li>Status and progress in acquiring the knowledge and skills described in the</li> </ul>	
	Head Start Child Development and Early Learning Framework	
	(demonstrated in any language, including the child's home language) and toward learning English in order to use school readiness data:	
	<ul> <li>Combine input from parents and families with assessment data to determine each child's status and progress in the five essential domains</li> <li>Individualize experiences, instructional strategies, and services to best support each child</li> <li>In combination with other program data, determine progress towards meeting program goals</li> <li>Assess the fidelity of implementation of the curriculum</li> <li>Direct continuous improvement related to the effectiveness of curriculum, instruction, professional development, and program design or other program decisions based on the analysis of school readiness outcomes data</li> </ul>	
l	Report Results	
	To inform parents and the community of the program's progress in achieving school readiness goals	



Note: Programs in operation fewer than 90 days are required to have a system to aggregate and analyze data at least twice during their program operation period.

#### **Targeted Questions**

School Readiness Assessment—Interview with ECD Coordinator and Head Start Director

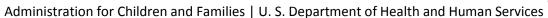
- Ask the ECD Coordinator and Director to describe the program's process for establishing school readiness goals for children enrolled in Head Start or Early Head Start. Your notes should describe how the program aligned school readiness goals with the following:
  - Head Start Child Development and Early Learning Framework
  - State Early Learning guidelines
  - Requirements and expectations of the schools the children will attend
- Ask the ECD Coordinator and Director to describe how parents are involved in the process of developing the program's school readiness goals.
- ▶ Review the program's school readiness goals with the ECD Coordinator and Director. For each of the five essential developmental domains, document an example that shows how the program reflected the domain in its goals. If the program did not include one or more of the domains in its goals, describe why.

CDE1.1

#### **Targeted Questions**

School Readiness Assessment—Interview with ECD Coordinator and Head Start Director

- ► How does the program aggregate and analyze individual, ongoing child-level assessment data for children birth to age 5 in all program options (e.g., home-based, center-based, FCC, EHS, and HS)?
- ▶ Does the program have a plan to complete the required aggregate data analyses?
- ▶ Ask the ECD Coordinator and Director to describe how the information gathered from the aggregated data analysis helps the program assess progress toward achieving school readiness goals. (Ask them to provide specific examples, and document them in your notes.)
- Ask the ECD Coordinator and Director to describe how the program makes improvements in the following areas based on its analysis of school readiness outcomes: (Ask them to include examples, and document them in your notes.)





- Curriculum and instruction
- Professional development
- Program design
- Other program decisions
- ▶ Describe how the program supports dual-language learners in making progress toward school readiness goals and learning English.
- Describe how the program informs parents and the community of its progress in achieving school readiness goals

CDE1.2

#### Teacher, Home Visitor, and FCC Provider – Interview

- ➤ Ask ECD staff to describe how they do the following. (Ask for specific examples, and document them in your notes.):
  - Use ongoing child-level assessment data to identify children's levels of development
  - Provide experiences to support children's development
  - Monitor children's progress throughout the program year

CDE1.2